



ACC Program Data for PIAC – April 2016

Enrollment¹

The following tables show enrollment numbers for the most recent months that data are available:

- **ACC Enrollment:** total count of clients enrolled in the ACC for this month, including the ACC: RMHP Prime program. **Note:** The number of RMHP Prime enrollees is not included in the enrollment numbers by population.
- **Percent Attributed:** percentage of ACC enrolled clients who are attributed to a PCMP.

ACC TOTAL Enrollment ¹				
RCCO	February ACC Enrollment	February % Attributed	March ACC Enrollment	March % Attributed
RCCO 1: RMHP	130,026	74%	131,364	73%
ACC: RMHP Prime	35,383	N/A	35,964	N/A
RCCO 2: CO Access	74,402	82%	75,013	82%
RCCO 3: CO Access	251,635	76%	253,476	76%
RCCO 4: ICHP	111,498	84%	111,938	83%
RCCO 5: CO Access	106,060	76%	105,456	77%
RCCO 6: CCHA	126,379	76%	128,037	76%
RCCO 7: CCCC	157,559	79%	159,724	78%
Total	992,942	77%	1,000,972	77%

ACC Child Enrollment ²				
RCCO	February Child Enrollment	February Child % Attributed	March Child Enrollment	March Child % Attributed
RCCO 1: RMHP	74,983	80%	75,382	80%
RCCO 2: CO Access	41,323	87%	41,633	87%
RCCO 3: CO Access	139,430	85%	139,878	85%
RCCO 4: ICHP	49,220	89%	49,360	88%
RCCO 5: CO Access	42,947	89%	42,967	89%
RCCO 6: CCHA	57,403	85%	57,731	85%
RCCO 7: CCCC	75,050	86%	75,667	86%
Total	480,356	85%	482,618	85%

¹ Numbers are a snapshot in time based off the first day of each month, using 3M methodology. They do not take into account any retroactivity. These numbers vary from the Joint Budget Committee caseload reports, which are based off the last day of each month.

² Does not include ACC: RMHP Prime.



ACC Expansion Enrollment ³				
RCCO	February Expansion Enrollment	February Expansion % Attributed	March Expansion Enrollment	March Expansion % Attributed
RCCO 1: RMHP	37,152	60%	38,167	60%
RCCO 2: CO Access	19,341	72%	19,799	71%
RCCO 3: CO Access	73,045	61%	74,820	61%
RCCO 4: ICHP	35,387	75%	35,897	74%
RCCO 5: CO Access	46,106	63%	45,702	64%
RCCO 6: CCHA	47,218	65%	48,806	64%
RCCO 7: CCCC	53,821	67%	55,491	67%
Total	312,070	65%	318,682	65%

ACC: MMP Enrollment ⁴				
RCCO	February MMP Enrollment	February MMP % Attributed	March MMP Enrollment	March MMP % Attributed
RCCO 1: RMHP	3,447	64%	3,486	63%
RCCO 2: CO Access	2,727	77%	2,739	77%
RCCO 3: CO Access	4,543	61%	4,558	61%
RCCO 4: ICHP	6,079	85%	6,076	85%
RCCO 5: CO Access	2,820	62%	2,771	63%
RCCO 6: CCHA	3,177	69%	3,168	69%
RCCO 7: CCCC	2,793	76%	2,813	76%
Total	25,586	72%	25,611	72%

³ Does not include ACC: RMHP Prime.

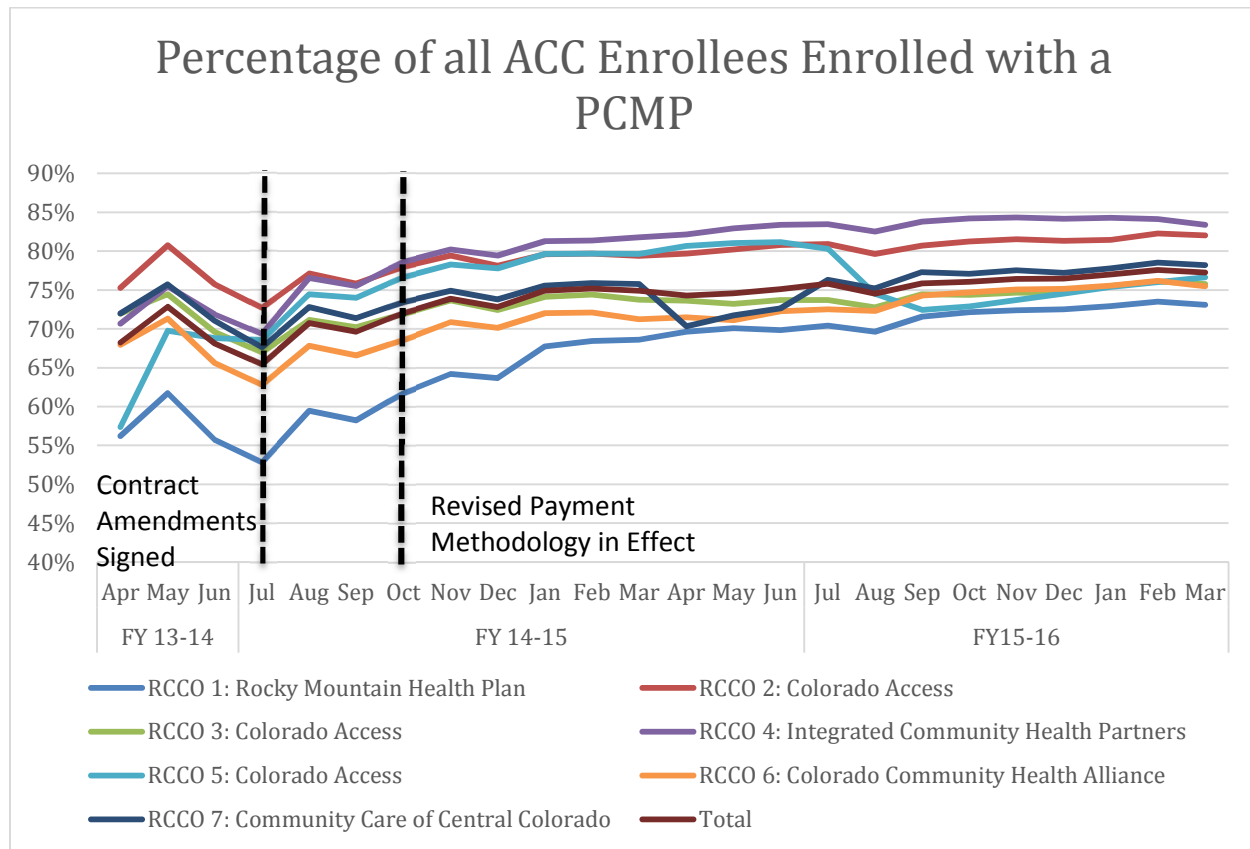
⁴ May 2015 was the last month of phased-in enrollment into the MMP program. Moving forward, newly eligible Medicaid-Medicare clients are being enrolled as they become eligible.

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Attribution

RCCOs earn a reduced per member per month payment for every client that is not attributed to a PCMP for six months or longer. The graph below shows the percent of enrollees in each RCCO who are attributed to a PCMP. The first vertical line designates the date that the RCCOs signed contract amendments regarding the tiered payment policy. The second vertical line designates the initiation of the revised methodology.



Key Performance Indicators (KPI) (SFY 15-16 Q1)

Q1 performance for ACC KPIs was significantly improved from the previous quarter. This improvement was partially due to the revised baselines for FY 15-16. The new baselines measure this quarter's performance against the CY 2014 population, which should be more demographically similar than the previous baseline population of FY 11-12.

Emergency Room (ER) Visits

This indicator is expressed as the number of Emergency Room visits per thousand members per month (PKPM). Emergency Room Visits are defined as any outpatient emergency department claim that did not have an inpatient stay on the same date of service for the same client ID number. The measure is risk and regionally adjusted. Each RCCO receives a Tier 1 incentive payment for reducing its unnecessary ER use by 1% from its respective benchmark. A Tier 2 payment is received for reducing unnecessary ER use by 5% or more from its benchmark.

- **All RCCOs met the Tier 1 target**
- **RCCO 6 met its Tier 2 target**
- **RCCO 7 met its Tier 2 target**

Well-Child Checks (Ages 3-9)

This indicator is expressed as a rate of children ages 3-9 receiving at least one well-child check over the last 12 months. Each RCCO receives a Tier 1 incentive payment for ensuring that 60% of children receive a well-child check. A Tier 2 payment is received for ensuring that 80% of children receive a well-child check.

- **No RCCO met its Tier 1 or Tier 2 targets**

Postpartum Follow-Up Care

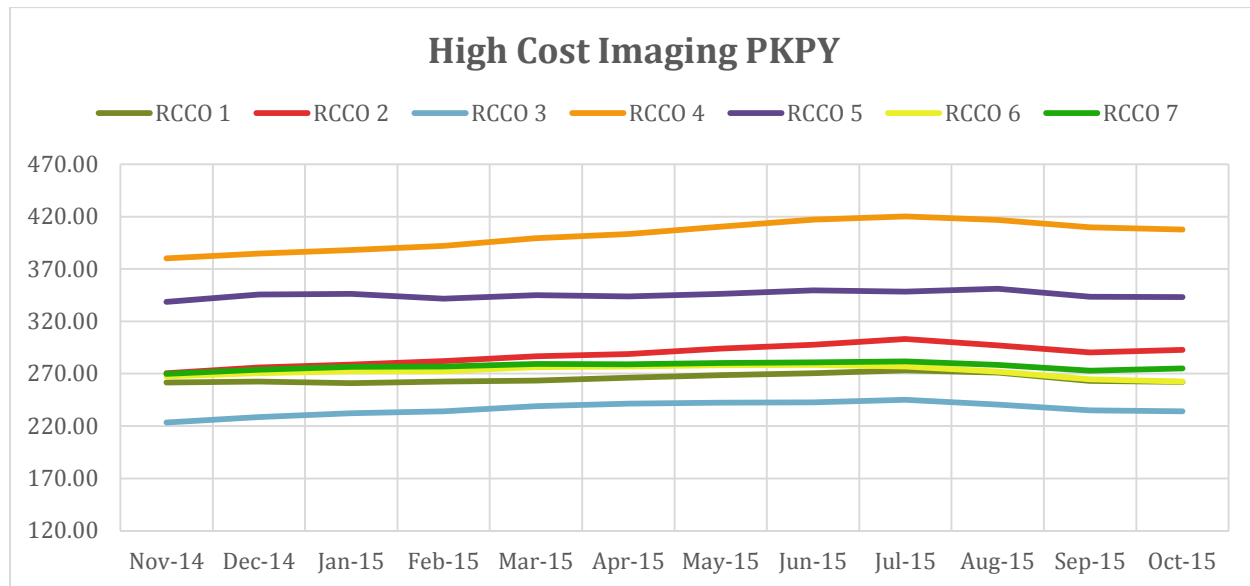
Postpartum Follow-Up Care is a completeness rate metric that evaluates the percentage of clients who receive a postpartum visit after a live birth. The targets for postpartum visits are based on a 1% (Tier 1) and 5% (Tier 2) improvement from a historic SFY 12-13 and 13-14 blended baseline rate at the region level.

- **RCCO 1 met its Tier 1 target**
- **RCCO 2 met its Tier 1 target**
- **RCCO 7 met its Tier 1 target**

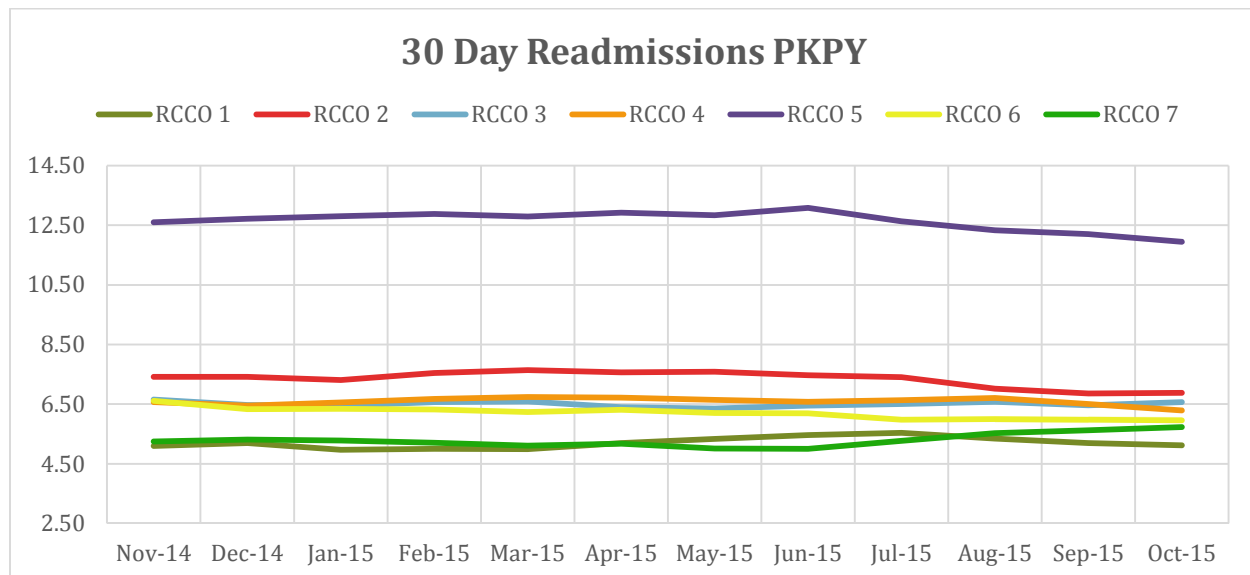


Retired Key Performance Indicators

High Cost Imaging: High cost imaging services represent any claim that is categorized as a Computed Tomography (CT) Scan or Magnetic Resonance Imaging (MRI) scan. High Cost Imaging Count PKPY, KPI Budget Population, Not Risk Adjusted



KPI 30-day Readmits: Thirty (30) Day All-Cause Readmissions are defined as any inpatient case that occurred within a 30-day time period following an inpatient discharge for an individual client. 30-day Readmits PKPY, KPI Budget Population, Not Risk Adjusted



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Total Cost of Care⁵

Date of Service Expenditures: September 2015 – November 2015			
	Department Calculated Medical PMPM	RCCO & PCMP Admin PMPM	Admin % = $\frac{\text{RCCO \& PCMP Admin}}{\text{(Dept. Calculated Medical PMPM + RCCO \& PCMP Admin)}}$
RCCO 1 – RMHP	\$276.89	\$10.65	3.70%
RCCO 2 – CO Access	\$336.43	\$11.15	3.21%
RCCO 3 – CO Access	\$311.94	\$10.42	3.23%
RCCO 4 – ICHP	\$387.72	\$11.26	2.82%
RCCO 5 – CO Access	\$353.06	\$10.70	2.94%
RCCO 6 – CCHA	\$342.32	\$10.25	2.91%
RCCO 7 – CCCC	\$317.86	\$10.92	3.32%
Statewide	\$327.46	\$10.70	3.16%

Date of service expenditures reports are derived from all of the claims from clients that were serviced in the same months as an ACC capitation payment was issued for those clients.

Medical PMPMs include all medical claims paid for clients including inpatient care, outpatient care, physician care, FQHC and rural health care, drugs, laboratory and x-rays, dental care, nursing facilities, rehab, home health care, home and community-based care, hospice care, developmental disability care, psychiatric hospital care, residential treatment, Indian health care, durable medical equipment, and emergency transportation.

⁵ There are several methods for calculating total cost of care. The numbers above are not risk adjusted, are based on a single time period, and are reflective of date of service (rather than date of payment). Therefore, these numbers may differ from future reporting.

